Income Disclosure For # Calendar Year 2007 (Pursuant to F.S. 42:1114-1)

NAME: Richard T. Burford

Legislative District-House District No. 7

2080160

2008-716

### INSTRUCTIONS

- If you do not have income to report, complete items 1 and 2(a) and (b) or 3(a) and (b), and sign below.
- Complete 2( $\epsilon$ ) and (b) or 3( $\epsilon$ ) and (b) whether or not income is reported.
- 3. If you have income to report complete this form with respect to income received during the previous calendar

Income exceeding \$250.00 received by a member, a member's spouse, or a business enterprise in which the member or the member's spouse owns at least 10% must be reported if received from any of the following:

- income received directly from the state, or local political subdivisions of the state. Complete Items 2(a) and (b) or 3(a) and (b) and Attachment A to report income received directly from the state or local political subdivisions of the state, and sign below. Income from service in the legislature, salary from full time employment of a member's spouse. selary of a member's spouse when such spouse is an elected official, and benefits from a statewide public retirement system are excluded and should not be reported.
- Income received for services performed for or in connection with a gaming interest. Complete Items 2(a) and (b) or 3(a) and (b) and Attachment B to report income which was received for services performed for on in connection with a garning interest, and sign below.
- This form must be signed by the legislator and filed with the Clerk by July 1.

Transmit original either to:

Louisiana Senato Office of the Secretary. P. O. Box 44183 Baton Rou je, LA 70804 OR:

Louisiana House of Representatives Office of the Clerk P. O. Box 44281 Beton Rouge, LA 70804

□ Neither I, my spouse, nor any business enterprise in which I or my spouse have a 10% interest or greater 1. has received income in excess of \$250.00 from the state of Louisiana or any local governmental entity or political subdivision thereof, or from services performed for or in connection with a garning interest.

# (Complete items 2(a) and (b) or 3(a) and (b) and sign below)

- □ (a) if certify that Thave filed my federal income tax return for the previous year. 2.
  - □ (b) I cer ify that I have filed my state income tax return for the previous year.

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OR

House of Representatives Cleck's Office

(a) I certify that I have filed for an extension of my federal income tax return for the previous year.

☑ (b) if certify that I have filled for an extension of my state income tax return for the previous year.

DATE:

PREPARED B1:

Glonn Koeph, Esperatory of the Senate

Alfred W. Speck, Clark of the Pouse

FOR OFFICE USE ONLY

Received by:

Date:

HAND DELIVERED

#### ATTACHMENT A

## Indome Received from the State or Local Political Subdivisions of the State

Each separate agency, department, or political subdivision from which income has been received should be listed separately. Also, income which may be received from the same or different agencies, departments, or subdivisions, but which was payable to different income sources (e.g., two different corporations) should be listed separately.

	If additional space is necessary, make copies of this attachment.				
Ø	I, my spouse, or a business enterprise in which I or my spouse have a 10% interest or greater have received income in excess of \$250.00 from the state of Louisiana, or a local governmental entity or political subdivision(s) thereof iss follows:				
	Information relative to ownership, financial interest and income derived from Medicaid funds may be accessed through files on record with the Department of Health and Hospitals, Bureau of Human Standards.  Twolve the Alexandrian Cook of the Cook			Hospitals, Bureau	
		Name of state againty, department, or p	Control Subdivision)	7 (12,000)	
	(2)	RECEIVED BY:			
		District D - C	لمد		
	(Se	If; Spouse; Business Enterprise in which	2 x d h self or spouse has ten percent (10%)	ownership.)	
		(3) If (2) above is a pusine is enterprise, interest in said enterprise of 10% or greater is owned by:  **Check cos**			
		Self (or asset of community p	property regime).	Bucsivan	
		Seouse (separate property).			
		Jointly , with abouse.		## JUN 1 0 2008 &	
	(4)	RECEIVED PURSUANT TO:		cleuse of Representativos Cleuk's Office	
	☐ (a) a provider agreement with DHH under state medical assistance program.				
		U (b) a foster parent or child care			
		☐ (c) a contract entered into prior to my initial election and not renewed.			
			a contract emered into prior to July 1, 1995 and not renewed.		
		<ul> <li>(e) employment I i a professional educational capacity in or for professional services for any elementary or secondary school or other educational institution.</li> </ul>			
		☐ (f)—a sale of imm avable property pursuant to an expropriation ☐ (g)—employment as a physician or other licensed health care professional with the state or the			
	charity hospit als of the state or the Department of Health and Hospitals.				
		<ul> <li>□ (h) a contract which, at the time it was entered into, was not prohibited and not renewed.</li> <li>□ (i) a contract awarded by competitive bidding after being advertised and awarded in accordance with the public bid law in RS 38:2211 et seq.</li> <li>□ (j) a contract competitively negotiated through a request for proposal or similar process in</li> </ul>			
accordance with the procurement of professional personal co					
		37:1481 et seg, and the Lou	isiana Produrement Code in RS 39:155	i et seq.	
		<ul> <li>D (k) a sale by a re ail establishme</li> </ul>	ant valued at two thousand five hundred	i dollars or less.	

Representative Richa d T. Burron:

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Celerkier Year 2007

LOUISIANA LEGISLATURE Income Disclosure Form Calendar Year 2007 (Pursuant to R 9, 42:1114.1

NAME: Timothy G. Burns

Legislative District-House District No. 89

#### **INSTRUCTIONS**

- If you do not have income to report, complete items 1 and 2(a) and (b) or 3(a) and (b), and sign below.
- Complete 2(a) and (b) or 3(a) and (b) whether or not income is reported.
- If you have income to report, complete this form with respect to income received during the previous calendar
  year.

Income exceeding \$250.00 received by a member, a member's apouse, or a business enterprise in which the member or the member's spouse owns at least 10% must be reported if received from any of the following:

- A. Income received directly from the state, or local political subdivisions of the state.

  Complete Items 2(a) and (b) or 3(a) and (b) and Attachment A to report income received directly from the state or local political subdivisions of the state, and sign below.

  Income from service in the legislature, salary from full time employment of a member's spouse, salary of a member's spouse when such spouse is an elected official, and benefits from a statewide.
- public retirement system are excluded and should not be reported.

  B. Income received for services performed for or in connection with a gaming interest.

  Complete items 2(a) and (b) and Attachment B to report income which was received for services performed for on in connection with a gaming interest, and sign below.
- 4. This form mus, be signed by the legislator and filed with the Clerk by July 1.
- 5. Transmit original either to:

Louisiana Senate

Office of the Secretar;

P. O. Box 14183 Baton Rouge LA 70804 Louisiana House of Representatives

Office of the Clerk P. O. Box 44281

Baton Rouge, LA 70804

1. A Neither I, my spouse, nor any business enterprise in which I or my spouse have a 10% interest or greater has received income in excess of \$250.00 from the state of Louisland or any local governmental entity or political subdivision thereof or from services performed for or in connection with a gaming interest.

## (Complete Items 2(a) and (b) or 3(a) and (b) and sign below)

Ch(a) I certify that I have filled my federal income tax return for the previous year.

Q (b) I certify that I have fired my state income tax return for the previous year.

16 C 9 1 0 2 7

OR

Liause of Representatives Clerk's Office

(a) I certify that I have filed for an extension of my federal income tax return for the previous year.

(b) I certify that I have I led for an extension of my state income tax return for the previous year.

SIGNATURE:

DATE:

6/20/08

FOR OFFICE USE ONLY

PREPARED BY

Glonn Koupp, Secretary of the Silnet s

aurd

Alfred W. Spool, Clerk of the Hollsa.

Received by: